

Harnett County Central Permitting

420 McKinney Pkwy / PO Box 65 Lillington, NC 27546 – centralpermitting@harnett.org

Ph.: 910-893-7525 - Fax: 910-893-2793 / www.harnett.org/permits

Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: Country Cable DBA Carolina Connections Phone: 336-585-1314 ext 333

Owner (s) Mailing Address: 422 Huffman Mill Road, Ste 105, Burlington, NC 27215

Land Owner Name (s): Bruce Wolfe Phone: 919-394-3610

Construction or Site Address: 40 Davinhall Drive, Fuquay-Varina, NC 27526

PIN # 0652-56-0957.000 Parcel # 080652 0022 22

Job Cost (Required): \$41,216.00 Description of Work to be done Install roofing solar interconnecting to the current

Duke Energy grid through existing electrical service equipment-no battery - 28 panels, 14 microinverters and racking. 458.44 sq ft

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___ Other ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___

* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

Head west toward S Main St, Turn right onto S Main St, Turn left onto McKinney Pkwy, Turn left onto US-401 N
Continue on Harnett Central Rd, Take Ballard Rd to Davinhall Drive

Subdivision: Providence Creek Lot #: 97

I Tony McCulloch Jr will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 1.22598, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Country Cable DBA Carolina Connections

Contractor's Company Name
422 Huffman Mill Road, Ste 105, Burlington, NC 27215

Address
1.22598

License #

336-585-1314 ext 333

Telephone
tonytiff9736@gmail.com

Email Address

Structure Owner / Contractor Signature: Tj W McCulloch Jr Date: 12-10-2024

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work

***Company name, address, & phone must match information on license**

Faxed or Mailed application could have an approximately 1-5 day process time

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Subdivision: Providence Creek Lot #: 97

I Tony Gingrich will provide the General Contractor labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 101681, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Country Cable DBA Carolina Connections

Contractor's Company Name

422 Huffman Mill Road, Ste 105, Burlington, NC 27215

Address

101681

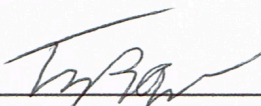
License #

336-585-1314 ext 333

Telephone

tony@carolinaconnections.com

Email Address

Structure Owner / Contractor Signature:  Date: 12/10/2024

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work

***Company name, address, & phone must match information on license**

Faxed or Mailed application could have an approximately 1-5 day process time



Application # _____

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Bruce Wolfe Date 12/10/2024
Site Address: 40 Davinhall Drive, Fuquay-Varina, NC 27526 Phone 919-394-3610
Subdivision: Providence Creek Lot 97
Description of Proposed Work: Rooftop Solar Installation Total Job Cost \$41216.00

General Contractor Information

Country Cable DBA Carolina Connections 336-585-1314 ext 333
Building Contractor's Company Name Telephone
422 Huffman Mill Road, Ste 105, Burlington, NC 27215 stacy@carolinaconnections.com
Address Email Address
101681
HEATED SQ FT 2330 GARAGE SQ FT
License #

Electrical Contractor Information

Description of Work Rooftop Solar Installation Service Size: _____ Amps T-Pole: ___ Yes ___ No
Country Cable DBA Carolina Connections 336-585-1314 ext 333
Electrical Contractor's Company Name Telephone
422 Huffman Mill Road, Ste 105, Burlington, NC 27215 stacy@carolinaconnections.com
Address Email Address
1.22598
License #

Mechanical/HVAC Contractor Information

Description of Work n/a
Mechanical Contractor's Company Name Telephone
Address Email Address
License #

Plumbing Contractor Information

Description of Work n/a # Baths _____
Plumbing Contractor's Company Name Telephone
Address Email Address
License #

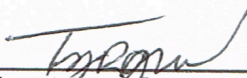
Insulation Contractor Information

n/a
Insulation Contractor's Company Name & Address Telephone

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**

I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that **by signing below I have obtained all subcontractors permission to obtain these permits** and if **any** changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.


Signature of Owner/Contractor/Officer(s) of Corporation

12-10-2024
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

General Contractor Owner Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

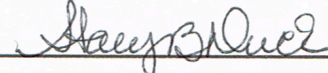
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.

Has no more than two (2) employees and no subcontractors.

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Sign w/Title:  Date: 12/10/2024

AFFIDAVIT OF WORKERS' COMPENSATION COVERAGE (N.C.G.S. §87-14)

The undersigned applicant for Building Permit # _____ being the:

...Contractor

...Owner

...Officer/Agent of the Contractor or Owner

do hereby affirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

...has/have three (3) or more employees and have obtained workers' compensation insurance to cover them,

...has/have one or more subcontractor(s) and have obtained workers' compensation insurance covering them,

...has/have one or more subcontractor(s) who has/have their own policy of workmen's compensation covering themselves,

...has/have not more than two (2) employees and no subcontractors,

while working on the project for which this permit is sought. It is understood that the Inspection Department issuing the permit may require certificates of coverage of workers' compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

THE SIGNATURE OF THE QUALIFIER OF THE LICENSE MUST BE NOTARIZED BELOW.

Firm or Company Name (If applicable):

Finance Director

By: [Signature]

Title (If applicable):

Email: Jennifer@CarolinaConnections.com

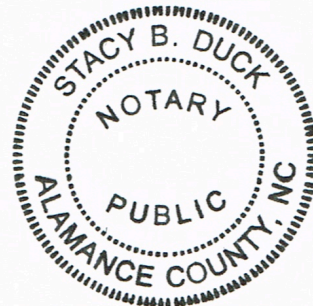
Date: MM/DD/YYYY 12/10/2024

I, Stacy B Duck, a Notary Public for Alamance County and State of North Carolina do hereby certify that Jennifer Holcomb personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal, this the 10 day of December, 20 24.

Notary Public Signature: [Signature]

My Commission Expires: 12-20-2028



Initial Application Date: 12/10/2024

Application # _____

CU# _____

Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits

****A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION****

LANDOWNER: Bruce Wolfe Mailing Address: 40 Davinhall Drive
City: Fuquay-Varina State: NC Zip: 27526 Contact No: 919-394-3610 Email: 466wolfe@gmail.com

APPLICANT*: Country Cable DBA Carolina Connections Mailing Address: 422 Huffman Mill Road, Ste 105
Stacy Duck City: Burlington State: NC Zip: 27215 Contact No: 336-585-1314 ext 333 Email: stacy@carolinaconnections.com

*Please fill out applicant information if different than landowner

ADDRESS: 40 Davinhall Drive, Fuguay-Varina PIN: 0652-56-0957.000

Zoning: Harnett Flood: n/a Watershed: _____ Deed Book / Page: 4235:1600

Setbacks - Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE:

SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: _____ Slab: _____ Monolithic
TOTAL HTD SQ FT _____ **GARAGE SQ FT** _____ (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)

Modular: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
TOTAL HTD SQ FT _____ (Is the second floor finished? () yes () no Any other site built additions? () yes () no

Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms: _____ Garage: _____ (site built? _____) Deck: _____ (site built? _____)

Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____ **TOTAL HTD SQ FT** _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____

Addition/Accessory/Other: (Size 458.44 sqft x _____) Use: Rooftop solar install to existing home 19 panels.10 microinverters and racking Closets in addition? () yes () no
TOTAL HTD SQ FT 2330 sqft **GARAGE** n/a

Water Supply: _____ County Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final
(Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: _____ New Septic Tank _____ Expansion _____ Relocation Existing Septic Tank _____ County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes () no

Does the property contain any easements whether underground or overhead () yes () no

Structures (existing or proposed): **Single Family** Single family dwellings: _____ Manufactured Homes: _____ Other (specify): _____

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Stacy Duck, Project Manager 12/10/2024
Signature of Owner or Owner's Agent Date

*****It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.*****

This application expires 6 months from the initial date if permits have not been issued*

APPLICATION CONTINUES ON BACK

****This application expires 6 months from the initial date if permits have not been issued****

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

Environmental Health New Septic System

- **All property irons must be made visible.** Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the **undergrowth** to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. ***Do not grade property.***
- **All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.**

Environmental Health Existing Tank Inspections

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place.** (Unless inspection is for a septic tank in a mobile home park)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- Accepted
 Innovative
 Conventional
 Any
 Alternative
 Other _____

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- YES NO Does the site contain any Jurisdictional Wetlands?
 YES NO Do you plan to have an irrigation system now or in the future?
 YES NO Does or will the building contain any drains? Please explain. _____
 YES NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
 YES NO Is any wastewater going to be generated on the site other than domestic sewage?
 YES NO Is the site subject to approval by any other Public Agency?
 YES NO Are there any Easements or Right of Ways on this property?
 YES NO Does the site contain any existing water, cable, phone or underground electric lines?
 If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.